COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL040334 US

As a below named inventor, I hereby declare that:				
My residence, post office address and citizenship are as stated next to my name.				
I believe I am the original, first a plural names are listed below) o the specification of which (check	of the subject matter which is o	name is listed below) or an original, firs claimed and for which a patent is sougl	t and joint inventor (if ht on the invention	
entitled:				
is attached hereto.				
was filed as United States a	oplication			
Serial No				
on				
and was amended				
on				
was filed as PCT internation	al application			
Number 182005/050991				
Number 182005/05099 on 23 Mech 200	> ≤			
and was amended under PCT A	Article 19			
on			(if applicable).	
claims, as amended by any amended by	endment referred to above. ose information which is mate s, material information which b PCT international filing date of enefits under 35 U.S.C.119(a) hts certificate(s), or 365(a) of a ed States of America, listed be atent, inventor's or plant breed	rial to patentability as defined in 37 CF became available between the filing dar the continuation-in-part application. -(d) or (f), or 365(b) of any foreign appeany PCT international application whice allow and have also identified below, by er's rights certificate(s), or of any PCT of which priority is claimed.	R 1.56, including for te of the prior lication(s) for patent, h designated at least y checking the box	
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:		
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	04101332.7	31 March 2004	YES	
		DEDARTMENT OF COMMERCE Patent a	T Office	

Com	bined Declaratio	n For Patent Application an T International Applications)	d Power of Attorney (Continue	ed)	Attorneys Docket Number PHNL040334 US
	ER OF ATTORNE	Y: As a named inventor I hereby	appoint the following attorney(s) and/ herewith. (List name and registration	or agent(s) to pros number)	
Mich	E. Haken, Reg. No ael E. Marion, Re ard M. Blocker, Re	g. No. 32, 266		Direct Telephor (name and tele (914)332-02	phone number) 22
	FULL NAME OF INVENTOR	FAMILY NAME HENDRIKS	FIRST GIVEN NAME Bernardus		SECOND GIVEN NAME Hendrikus Wilhelmus
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COL	INTRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhov	en	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME KUIPER	FIRST GIVEN NAME Stein		SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COL	JNTRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhov	en	STATE & ZIP CODE/COUNTRY The Netherlands
rue: a mpris		e statements were made with the k der section 1001 of Title 18 of the l	knowledge are true and that all stater knowledge that willful false statements United states Code, and that such wil	and the like 30 m	ade are purishable by fine of
SIGN	ATURE OF INVENT	OR 201 SIGNAT	TURE OF INVENTOR 202		
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U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

DATE

DATE

07 Aug 2006

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

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As a below named inventor, I he	reby declare that:		
My residence, post office addres	ss and citizenship are as state	d next to my name.	
I believe I am the original, first a plural names are listed below) o the specification of which (check	f the subject matter which is cl	ame is listed below) or an original, first laimed and for which a patent is sough	and joint inventor (if it on the invention
entitled:			
is attached hereto.			
☐ was filed as United States ap	pplication		
Serial No			
on			
and was amended			4
on			
was filed as PCT internation	al application		
Number 162005/050	991		
on 18 2005/050	>>≤		
and was amended under PCT A			
on			(if applicable).
I hereby state that I have review claims, as amended by any am	ved and understand the conter endment referred to above.	nts of the above-identified specificatior	n, including the
continuation-in-part applications	s. material information which b	rial to patentability as defined in 37 CF became available between the filing da the continuation-in-part application.	R 1.56, including for te of the prior
inventor's or plant breeder's rig	hts certificate(s), or 365(a) of a ed States of America, listed be atent, inventor's or plant breed	-(d) or (f), or 365(b) of any foreign app any PCT international application which elow and have also identified below, by er's rights certificate(s), or of any PCT of which priority is claimed.	checking the box
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	04101332.7	31 March 2004	YES
	U.S.	DEPARTMENT OF COMMERCE -Patent a	and Trademarks Office (July 1994)

(includ	es Reference to PC	T International Applications)	Power of Attorney (Continued)	Attorneys Docket Number PHNL040334 US
POW	R OF ATTORNE	Y. As a named inventor. I hereby ap	point the following attorney(s) and/or a rewith. (List name and registration num	gent(s) to prosecute this application and transact ber)
Micha	E. Haken, Reg. No nel E. Marion, Re rd M. Blocker, Re	g. No. 32, 266	(orect Telephone Calls to: name and telephone number) 914)332-0222
	FULL NAME OF	FAMILY NAME HENDRIKS	FIRST GIVEN NAME Bernardus	SECOND GIVEN NAME Hendrikus Wilhelmus
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNT The Netherlands	RY COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhover	STATE & ZIP CODE/COUNTRY The Netherlands
202	FULL NAME OF INVENTOR	FAMILY NAME KUIPER	FIRST GIVEN NAME Stein	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNT The Netherlands	The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhover	STATE & ZIP CODE/COUNTRY The Netherlands
true: a	and firether that there	e statements were made with the kno der section 1001 of Title 18 of the Ur	owledge that willful false statements an	ts made on information and belief are believed to be d the like so made are punishable by fine or false statements may jeopardize the validity of the

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